



Business Registration Form

The system is available to City of Rockford businesses only!

Business Name: _____

Street Address: _____
City of Rockford Businesses Only!!

Primary Contact Number: (____) ____ - _____

Email Address: _____

Confirmation Phone Number: (____) ____ - _____

- Please deliver this completed form to the Rockford Police Department located at 420 West State Street
Rockford IL. 61101
- Any inquires should be made to Sgt. Patrick Hoey at 815-987-5041 or at Patrick.hoey@rockfordil.gov

